

09 68M238

PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number	
Substitute for Form PTO-875							
CLAIMS AS FILED – PART I <div style="display: flex; justify-content: space-around; font-size: small;"> (Column 1) (Column 2) </div>							
FOR	NUMBER FILED	NUMBER EXTRA			SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
BASIC FEE (37 CFR 1.16(a))					RATE	FEE	
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*			X \$ ____ =		OR
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*			X \$ ____ =		OR
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ \$ ____ =		OR
					TOTAL		OR
* If the difference in column 1 is less than zero, enter "0" in column 2.							
CLAIMS AS AMENDED – PART II <div style="display: flex; justify-content: space-around; font-size: small;"> (Column 1) (Column 2) (Column 3) </div>							
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	* 4	Minus	** 20	=		
	Independent (37 CFR 1.16(b))	* 2	Minus	*** 3	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						
		SMALL ENTITY			OR	OTHER THAN SMALL ENTITY	
		RATE			ADDITIONAL FEE		
		X \$ ____ =					
		X \$ ____ =					
		+ \$ ____ =					
		TOTAL ADD'L FEE					
		OR			OR		
		RATE			ADDITIONAL FEE		
		X \$ ____ =					
		X \$ ____ =					
		+ \$ ____ =					
		TOTAL ADD'L FEE					
<div style="display: flex; justify-content: space-around; font-size: small;"> (Column 1) (Column 2) (Column 3) </div>							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	*	Minus	**	=		
	Independent (37 CFR 1.16(b))	*	Minus	***	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						
		SMALL ENTITY			OR	OTHER THAN SMALL ENTITY	
		RATE			ADDITIONAL FEE		
		X \$ ____ =					
		X \$ ____ =					
		+ \$ ____ =					
		TOTAL ADD'L FEE					
		OR			OR		
		RATE			ADDITIONAL FEE		
		X \$ ____ =					
		X \$ ____ =					
		+ \$ ____ =					
		TOTAL ADD'L FEE					
<div style="display: flex; justify-content: space-around; font-size: small;"> (Column 1) (Column 2) (Column 3) </div>							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	*	Minus	**	=		
	Independent (37 CFR 1.16(b))	*	Minus	***	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						
		SMALL ENTITY			OR	OTHER THAN SMALL ENTITY	
		RATE			ADDITIONAL FEE		
		X \$ ____ =					
		X \$ ____ =					
		+ \$ ____ =					
		TOTAL ADD'L FEE					
		OR			OR		
		RATE			ADDITIONAL FEE		
		X \$ ____ =					
		X \$ ____ =					
		+ \$ ____ =					
		TOTAL ADD'L FEE					

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09/687/238

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	1 minus 20 =	—
INDEPENDENT CLAIMS	1 minus 3 =	—
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	4	20	—
Independent	2	3	—
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	4	20	—
Independent	2	3	—
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

11/19/05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	4	20	—
Independent	2	3	—
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	FEE
BASIC FEE	710.00
X\$18=	
X80=	
+270=	
TOTAL	710.00

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

BEST AVAILABLE COPY